Approved for use through 1/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/190,788			ing Date 12/1998	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY 🛛				HER THAN ALL ENTITY	
FOR			IUMBER FII	.ED NU	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p),		N/A		N/A		N/A			N/A		
	FAL CLAIMS CFR 1.16(i))		minus 20 = *				x \$ =		OR	x \$ =		
	EPENDENT CLAIN CFR 1.16(h))	IS	minus 3 = *			1	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sheed is \$2 add	ets of pap 250 (\$125 tional 50	gs exceed 100 on size fee due for each n thereof. See CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									1			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		J	TOTAL		
APPLICATION AS AMENDED – PART II  (Column 1) (Column 2) (Column 3)								L ENTITY	OR		ER THAN ALL ENTITY	
AMENDMENT	11/18/2008	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	• 4	Minus	·· 20	= 0	1	X \$26 =	0	OR	x s =		
	Independent (37 CFR 1,16(h))	• 1	Minus	3	= 0	1	X \$110 =	0	OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())	*	Minus	**	=		x s =		OR	x \$ =		
Σ	Independent (37 CFR 1.16(h))	*	Minus	***	=	]	x \$ =		OR	x \$ =		
필	Application Size Fee (37 CFR 1.16(s))					l			1			
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If *** The	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "3".  The "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20".  "If the "Highest Number Previously Paid For" (To THIS SPACE is less than 20".  "If the "Highest Number Previously Paid For "To											

process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, processy an application. Combining by governed by 30 csts. 122 and 30 cst 17.1 mis collection be sentated to lake 12 intellest of completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information dofficer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.